

The Growing Demand for Healthcare Workers in Virginia

The United States has faced shortages of healthcare workers for years; a challenge that was only exacerbated by the COVID-19 pandemic. By 2018, even before the pandemic, there were 27 open healthcare practitioner jobs — such as doctors, surgeons, and registered nurses — for every available unemployed healthcare practitioner across the country.¹ And the situation in Virginia is no exception.² Despite the many barriers that internationally trained healthcare workers face to practicing medicine in the state, immigrants routinely punch above their weight in the field.³ In 2019, they made up 14.5 percent of the state's healthcare workers⁴ — including 28.9 percent of all physicians and surgeons⁵ — while making up 12.8 percent of the population.⁶

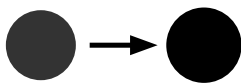
For Virginia to remain competitive and address critical shortages of physicians and other healthcare workers, it will be crucial to implement policies that not only attract and retain global talent that is complementary to the U.S.-born workforce, but that also build career pathways for immigrants who already call the state home.

One way to achieve this goal is to join states like Minnesota and Washington in reducing barriers for international medical graduates (IMGs) and other internationally trained healthcare workers.

In light of the COVID-19 pandemic, labor shortages, and a growing number of baby boomers who are reaching retirement age, Virginia has seen an increase in demand for healthcare workers.

From 2017 to 2021, there were **570,288** unique healthcare worker job postings in Virginia,⁷ an increase of

+15.9%



During the same time, the median advertised wages also rose from **\$32.68** to **\$37.35 per hour**,⁸ or

+\$4.67/hr

From 2017 to 2021, the **top five in-demand healthcare jobs** in Virginia were:⁹

1. Registered Nurses
2. Medical Records Specialists
3. Licensed Practical and Licensed Vocational Nurses
4. Physical Therapists
5. Physicians

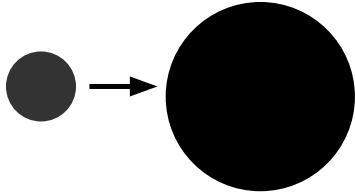
During the same period, the **top Virginia employers** hiring healthcare workers were:¹⁰

1. Anthem Blue Cross
2. HCA Healthcare
3. Sentara Healthcare
4. Inova Health System
5. Bon Secours

ONLINE JOB POSTINGS FOR HEALTHCARE WORKERS, 2017 - 2021¹¹

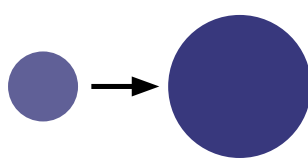
Dental Hygienists

+630.8%



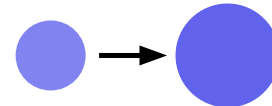
Opticians, Dispensing

+318.4%



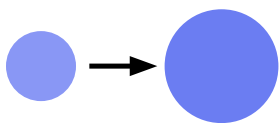
Dentists

+181.7%



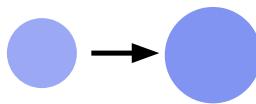
Optometrists

+91.6%



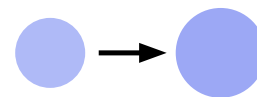
Psychiatric Technicians

+89.9%



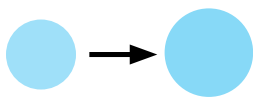
Diagnostic Medical
Sonographers

+64.4%



Magnetic Resonance
Imaging Technologists

+60.0%



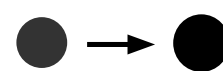
Licensed Practical and
Licensed Vocational Nurses

+53.7%

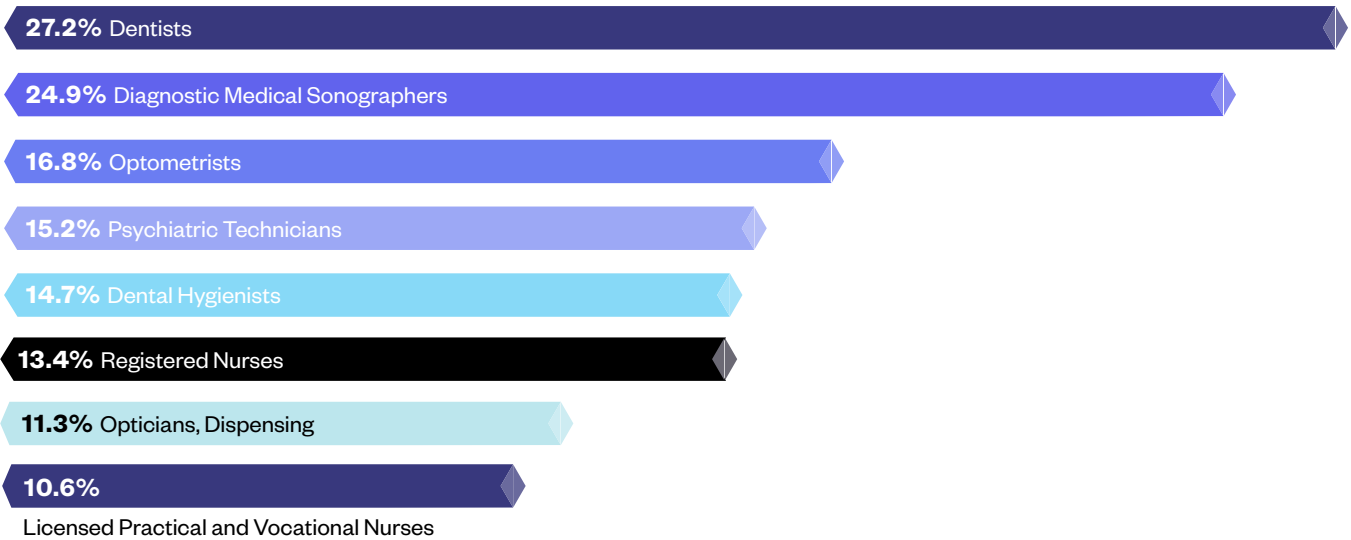


Registered Nurses

+1.5%



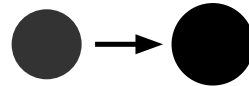
The average share of healthcare workers from 2015 to 2019 who were immigrants:¹²



As employers struggle to recruit and retain specialized healthcare workers, immigrants play a crucial role in helping to address labor shortages. With an increase in demand for multilingual and culturally competent employees, internationally trained healthcare professionals are uniquely positioned to provide support across all healthcare settings.

From 2017 to 2021, the number of healthcare job postings that required bilingual skills in Virginia increased by¹³

+38.8%



HEALTHCARE JOB POSTINGS BY RURAL-URBAN CLASSIFICATION¹⁴

The number of job postings between 2017 and 2021 by Virginia County Classification:

For small/medium metro counties¹⁵ the number of postings decreased by



For rural counties¹⁶ the number of postings decreased by



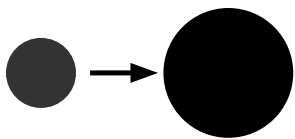
PHYSICIANS

In 2015, long before the COVID-19 pandemic, Virginia faced severe physician shortages, with some counties across the state registering zero physicians per 100,000 residents.¹⁷ Projections remain dire. Virginia is expected to need an additional 1,622 primary care physicians by 2030,¹⁸ significantly impacting the accessibility of healthcare, particularly in rural communities.

ONLINE JOB POSTINGS FOR PHYSICIANS, 2017 - 2021¹⁹

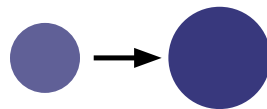
Oral and Maxillofacial Surgeons

+244.0%



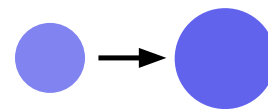
Podiatrists

+118.2%



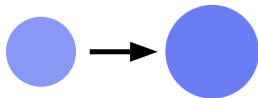
Obstetricians and Gynecologists

+107.5%



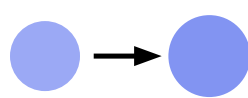
General Internal Medicine Physicians

+79.7%



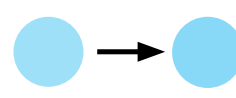
Anesthesiologists

+37.2%



Surgeons, Except Ophthalmologists

+34.8%



The average share of workers from 2015 to 2019 who were immigrants:²⁰

28.9% Physicians

30.8% Surgeons

BRAIN WASTE IN VIRGINIA

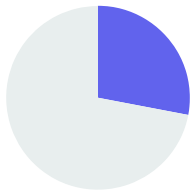
Although there is a growing need for healthcare workers in Virginia, many immigrants who have received specialized education, training, and licensing abroad are unable to practice in the state, facing challenges such as recredentialing and language proficiency. Their skillsets are all too often underutilized — in what is known as “brain waste” — which frequently leads to under- or unemployment.²¹

In 2021, across Virginia:²²

Share of residents who had a biology or healthcare-related bachelor’s degree but worked in an occupation that did not require a bachelor’s:

25.1% FOREIGN-BORN

21.4% U.S.-BORN



28.1%

of immigrants with professional and doctorate degrees²³ worked in occupations in the healthcare industry that did not require a medical doctorate or professional degree.

Addressing the barriers that prevent additional qualified, internationally trained healthcare workers from practicing in Virginia will be vital to helping the state meet its growing healthcare needs.

ENDNOTES

1. New American Economy, “Immigrant Healthcare Workers Are Critical in the Fight Against Covid-19,” April 2020, <https://research.newamericaneconomy.org/report/covid-19-immigrant-healthcare-workers/>.
2. Unless stated otherwise, all data in this report is reflective of Virginia.
3. We define an immigrant as anyone born outside the country to non-U.S. citizen parents who is a resident in the United States. This includes naturalized citizens, green card holders, temporary visa holders, refugees, asylees, and undocumented immigrants, among others.
4. American Immigration Council analysis of the IPUMS microdata from the 2019 American Community Survey, 1-Year Sample.
5. Ibid.
6. American Immigration Council analysis of data from the 1-year 2019 American Community Survey. See American Immigration Council, “Map the Impact: Virginia,” accessed on July 31, 2022, <https://www.newamericaneconomy.org/locations/virginia/>.
7. American Immigration Council analysis of data compiled by Lightcast 2022, <https://kb.emsidata.com/methodology/ems-data-basic-overview/>.
8. Ibid.
9. Ibid.
10. Ibid.
11. Ibid.
12. American Immigration Council analysis of the IPUMS microdata from the 2019 American Community Survey, 1-Year Sample.
13. American Immigration Council analysis of data compiled by Lightcast 2022, <https://kb.emsidata.com/methodology/ems-data-basic-overview/>.
14. Using the 2013 NCHS Urban–Rural Classification Scheme for Counties, Virginia counties were grouped into two different population groups: medium and small metropolitan, and rural counties. NCHS medium and small metropolitan counties were combined for the middle classification. Rural counties were identified using the micropolitan and non-core NCHS classifications.
15. Small and medium metro counties in Virginia include Amherst, Appomattox, Bedford, Botetourt, Campbell, Craig, Franklin, Roanoke, Scott, Washington, Bedford city, Bristol city, Lynchburg city, Roanoke city, Salem city, Albemarle, Augusta, Buckingham, Floyd, Fluvanna, Frederick, Giles, Greene, Montgomery, Nelson, Pulaski, Rockingham, Charlottesville city, Harrisonburg city, Radford city, Staunton city, Waynesboro city, and Winchester city counties.
16. Rural counties in Virginia include Dickenson, Henry, Pittsylvania, Tazewell, Wise, Danville city, Martinsville city, Norton city, Accomack, Alleghany, Bath, Bland, Brunswick, Buchanan, Carroll, Charlotte, Cumberland, Essex, Grayson, Greensville, Halifax, Highland, King and Queen, King George, Lancaster, Lee, Louisa, Lunenburg, Madison, Mecklenburg, Middlesex, Northampton, Northumberland, Nottoway, Orange, Page, Patrick, Prince Edward, Richmond, Rockbridge, Russell, Shenandoah, Smyth, Southampton, Surry, Westmoreland, Wythe, Buena Vista city, Clifton Forge city, Covington city, Emporia city, Franklin city, Galax city, and Lexington city counties.
17. New American Economy, “Life Support: The Shortage of Physicians in America’s Rural Counties and How Foreign-Born Doctors Can Help,” September 2015, <http://research.newamericaneconomy.org/wp-content/uploads/2015/09/lifesupport929-1.pdf>.
18. Stephen M. Petterson, Angela Cai, Miranda Moore, and Andrew Bazemore, “Virginia: Projecting Primary Care Physician Workforce, 2010–2030,” Robert Graham Center, September 2013, <https://www.aafp.org/dam/rgc/documents/maps-data-tools/state-collections/workforce-projections/Virginia.pdf>.
19. American Immigration Council analysis of data compiled by Lightcast 2022, <https://kb.emsidata.com/methodology/ems-data-basic-overview/>.
20. American Immigration Council analysis of the IPUMS microdata from the 2019 American Community Survey, 1-Year Sample.
21. New American Economy, “Untapped Talent: The Costs of Brain Waste Among Highly Skilled Immigrants in the United States,” December 2016, http://research.newamericaneconomy.org/wp-content/uploads/2016/12/NAE_BrainWaste_V4_Digital.pdf.
22. American Immigration Council analysis of data from the 2019 American Community Survey, 5-Year Sample.
23. Doctorate degrees include the fields of Biology and Life Sciences, Nuclear, Industrial Radiology and Biological Technologies, and Medical and Health Sciences and Services.